KNOW YOUR RIGHTS

Is it safe to apply for public health care affordability programs or to seek health care?

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Families that include people who are not authorized to be in the U.S. often have questions about whether it is safe for them to apply for health coverage through the Affordable Care Act (ACA) Marketplaces, Medicaid, and CHIP (Children’s Health Insurance Program). Some individuals and families decide not to seek health care because they fear that their family member’s immigration status might be discovered or shared with immigration enforcement agents. This factsheet provides information that all families should know when they apply for health insurance programs or seek health care services.

Privacy rules protect families applying for health insurance, including families whose members have different immigration statuses.

The information a person provides while applying for Medicaid, CHIP, or an ACA Marketplace plan may be used only for the operations of that program—not for immigration enforcement purposes. Government workers, enrollment assisters, and people who help with insurance applications are required by law to keep information private and secure.

Do not provide your immigration status if you are not applying for insurance for yourself.

By law, applications for Medicaid, CHIP, and insurance bought through the Marketplace can require citizenship or immigration status information only from people who are applying for coverage for themselves. The applications may not ask for citizenship or immigration status information about people who are applying on behalf of eligible family members and any other members of the household who are not applying for coverage for themselves. If you are applying for coverage for someone else, such as your child, and someone asks about your immigration status, you can say “I am not applying for health insurance for myself.”

If you don’t have a Social Security number (SSN), you don’t have to provide one.

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1 The names for Medicaid, CHIP and the Marketplace often vary from state to state.
Whether you are applying for health insurance for yourself or on behalf of eligible family members, your health insurance application may not be delayed or denied because you don't have an SSN. Only people who have a valid SSN issued by the Social Security Administration are required to provide one.

**Everyone has a right to an interpreter when applying for health insurance or seeking health care, at no cost.**

Regardless of your immigration status, you have a right to be assisted by an interpreter at no cost when you are applying for Medicaid, CHIP, or a Marketplace plan, and when you are seeking care at a hospital or community health center. Children should not be asked to interpret for their parents or other adults, especially in health care settings. Government offices, hospitals and community health centers may use bilingual staff, telephone interpretation services, or qualified in-person interpreters to provide language assistance services.

**Certain health care options are available to everyone, regardless of their immigration status.**

The following health care programs and services are available for everyone, including undocumented immigrants, people with Deferred Action for Childhood Arrivals (DACA), and other uninsured people in all states:

- Basic treatment for serious emergencies in an emergency room
- Services from community health centers, migrant health centers, and free clinics
- Public health services (immunizations, mental health, screening and treatment for communicable diseases such as COVID-19)
- Programs providing health services necessary to protect life or safety: emergency medical, food or shelter, mental health crisis, domestic violence, crime victim assistance, disaster relief
- Treatment for an emergency medical condition under “emergency Medicaid,” including labor and delivery for pregnancy
- Financial assistance or “charity care” programs at community health centers and most public and safety-net hospitals

More options may be available in your state; check with a trusted local health care provider or with an immigrants’ rights or health advocacy group. Note that currently five states and the District of Columbia provide state-funded Medicaid or CHIP coverage to children and youth regardless of immigration status (the states are California, Illinois, Massachusetts, New York, Washington); and sixteen states and the District of Columbia provide pregnancy-related services to pregnant women regardless of immigration status. More information is available at [www.nilc.org/healthcoveragemaps/](http://www.nilc.org/healthcoveragemaps/) and [www.nilc.org/medical-assistance-various-states/](http://www.nilc.org/medical-assistance-various-states/).

**Health care providers should not ask for immigration status information.**
Under federal law, hospitals with emergency rooms must screen and treat people who need emergency medical services regardless of whether they have insurance, how much money they have, or their immigration status. Similarly, anyone can seek primary and preventive health care at community health centers regardless of whether they are insured, their ability to pay, or their immigration status.

Neither citizenship, lawful immigration status, nor a Social Security number are required to receive health care services under federal law. Doctors, hospitals, clinics, health centers, or other medical providers may ask for this information to find out if you may be eligible for public health insurance, like Medicaid, and how you are going to pay for services. But they should not deny medical treatment based solely on your immigration status—or based on assumptions about your immigration status they make because of the language you speak, your accent, what you look like, or whether you have an SSN. In fact, doing so may violate federal civil rights laws.

Even though health care workers have no duty to report your immigration status to law enforcement or federal immigration officials, if you are undocumented you should not provide your immigration status information to workers at a hospital, health center, or doctor’s office. If you don’t have health insurance, you may say, “I am not eligible for health insurance and do not want to apply.”

Existing policy keeps immigration officials away from hospitals and medical facilities.

The current and longstanding policy of immigration enforcement officials at U.S. Immigration and Customs Enforcement (ICE) and U.S. Customs and Border Protection (CBP) is to avoid hospitals, doctors’ offices, accredited health clinics, and emergent or urgent care facilities. (More information about this policy is available at www.dhs.gov/news/2016/07/15/fact-sheet-frequently-asked-questions-existing-guidance-enforcement-actions-or.)

While this policy is currently in force, it could change under a future presidential administration.

You should not have to show a photo ID to receive medical treatment.

Hospitals or doctors may ask for photo identification, but not for purposes of immigration enforcement. Photo ID may be needed to show that the person getting care is the person whose name is on the medical record or on the prescription. No one should be refused treatment because they do not have a photo ID.

IMPORTANT RESOURCES

To find a health center, go to https://findahealthcenter.hrsa.gov.
To find a free or charitable clinic, go to https://nafcclinics.org/find-clinic/.

Suicide and Crisis Lifeline (English & Spanish; interpretation available in other languages) — 988, www.suicidepreventionlifeline.org
Know the Signs: Suicide Is Preventable — www.suicideispreventable.org

Mental Health and Substance Abuse National Helpline (English & Spanish) — 1-800-662-HELP (4357), www.samhsa.gov/find-help/national-helpline

Behavioral Health Treatment Services Locator — https://findtreatment.samhsa.gov/

Know Your Rights: Everyone Has Certain Basic Rights, No Matter Who Is President — www.nilc.org/everyone-has-certain-basic-rights/

If you have DACA: FAQs and know-your-rights resources — www.nilc.org/daca/